	-	Effec	tive Octo						8	رد کر	· · · · · · · · · · · · · · · · · · ·
	<i>)</i>	CLAIMS A	S FILED			umn 21	SMALI TYPE	ENTITY	OF		R THAN ENTITY
T	OTAL CLAIMS		3/		•		RAT	FEE	7	RATE	FEE
F	QR .		NUMBER FILED		NUMBER EXTRA		BASIC	EE 385.0		BASIC FEE	770.00
Ţ	DTAL CHARGEABLE CLAIMS		3/ minus 20=		· 1/		XS 9		OF	¥2.0	198
IN	DEPENDENT CLAIMS		2' minus 3 =		0		X43:		OF	Ves	110
М	ULTIPLE DEPE	NDENT CLAIM P	RESENT				+145		OF		
•1	f the differenc	e in column 1 is	less than z	ın zero. enter "O" in column			TOTA		OF		968
	/ / / CLAIMS AS AMENDED - PART II						C11A1	L-ENTITY		OTHER	
	14/0	(Column 1)	1	Colun		(Column 3)	) C	<del></del>	-0H	SMALL	
AMENDMENT A		REMAINING AFTER AMENDMENT	)	NUME PREVIO PAID F	BER	PRESENT EXTRA	RATE	ADDI- TIONAL FEE	·	RATE	ADDI- TIONAL FEE
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L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+145=		OR	+290=	
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ENT B	11/17/06	REMAINING AFTER AMENDMENT	•	NUMB PREVIOUS PAID F	ER USLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
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اسن.		mber Previously Pai	For IN THE	S SPACE &	ess than	3. enter "3."	ADDIT. FEE			DOM. FEEL	

- Application or Docket Number